

Bureau of Health Care Quality & Compliance

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| STATEMENT OF DEFICIENCIES<br>AND PLAN OF CORRECTION        |   | (X1) PROVIDER/SUPPLIER/CLIA<br>IDENTIFICATION NUMBER:<br><br><b>NVS3170AGC</b>               | (X2) MULTIPLE CONSTRUCTION<br>A. BUILDING _____<br>B. WING _____   | (X3) DATE SURVEY<br>COMPLETED<br><br><b>07/10/2009</b> |
| NAME OF PROVIDER OR SUPPLIER<br><br><b>FELIS CARE HOME</b> |   | STREET ADDRESS, CITY, STATE, ZIP CODE<br><b>1042 FEATHERWOOD AVE<br/>HENDERSON, NV 89015</b> |  |  |
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| Y 000  | <p>Initial Comments</p> <p>The findings and conclusions of any investigation by the Health Division shall not be construed as prohibiting any criminal or civil investigations, actions or other claims for relief that may be available to any party under applicable federal, state, or local laws.</p> <p>This Statement of Deficiencies was generated as a result of a complaint investigation and re-survey conducted in your facility on 7/10/09. This State Licensure survey was conducted by the authority of NRS 449.150, Powers of the Health Division.</p> <p>The facility is licensed for seven Residential Facility for Group beds for elderly and disabled persons, Category II residents. The census at the time of the survey was two. Two resident files were reviewed. One discharged resident file was reviewed.</p> <p>Complaint #NV00022501 was substantiated See Tags Y590, Y878, Y253.</p> <p>The following other deficiencies were identified during the complaint investigation:</p> | Y 000  |  |  |
| Y 253<br>SS=F  | <p>449.217(4) Adequate Supplies of Food</p> <p>NAC 449.217<br/>4. The administrator of a residential facility shall ensure that there is at least a 2-day supply of fresh food and at least a 1-week supply of canned food in the facility at all times.</p> <p>This Regulation is not met as evidenced by:<br/>Based on observation and interview on 7/10/09,</p>  | Y 253  |  |  |

If deficiencies are cited, an approved plan of correction must be returned within 10 days after receipt of this statement of deficiencies.

TITLE

(X6) DATE

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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| Y 253  | Continued From page 1<br><br>the facility failed to provide at least a 2-day supply<br>of fresh food and at least a 1-week supply of<br>canned food in the facility for 2 of 2 residents.<br><br>Severity: 2      Scope: 3  | Y 253  |  |                          |  |
| Y 272<br>SS=C  | 449.2175(3) Service of Food - Menus<br><br>NAC 449.2175<br>3. Menus must be in writing, planned a week in<br>advance, dated, posted and kept on file for 90<br>days.<br><br>This Regulation is not met as evidenced by:<br>Based on observation and interview on 7/10/09,<br>the facility failed to ensure the planned, dated and<br>posted menu was followed for the lunch meal on<br>the day of the survey.<br><br>This is a repeat deficiency from the 6/11/09<br>complaint investigation and the 11/21/08 State<br>Licensure Survey.<br><br>Severity: 1      Scope: 3 | Y 272  |  |                          |  |
| Y 590<br>SS=I  | 449.268(1)(a) Resident Rights<br><br>NAC 449.268<br>1. The administrator of a residential facility shall<br>ensure that:<br>(a) The residents are not abused, neglected or<br>exploited by a member of the staff of the facility,<br>another resident of the facility or any person who<br>is visiting the facility.  | Y 590  |  |                          |  |

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| Y 590  | <p>Continued From page 2</p> <p>This Regulation is not met as evidenced by:<br/>Based on observation, interview and record review on 7/10/09, the administrator failed to ensure that 2 of 3 residents were not neglected by a member of the staff (Resident #1 and #2).</p> <p>Findings include:</p> <p>A complaint alleged that the owner of the facility was not giving proper care to Resident #1. The specific allegation was the owner refused to allow Resident #1's hair to be shampooed when she got her hair cut. An onsite visit was made to the local beauty salon where Resident #1 received her hair cut. Several beauticians recalled Resident #1 being at the salon and they remembered the resident's hair was very dirty and she smelled. The hairdresser who cut the resident's hair was contacted by telephone. The hairdresser recalled the resident's white hair was so dirty it was yellow and matted to her head. The hairdresser wanted to wash her hair and the resident wanted her hair washed. The facility owner told the hairdresser "no," the resident could wash her hair at home. The hairdresser reported she offered several times to wash the resident's hair and the owner kept saying no. The owner did not give a reason for denying the hair wash. The owner was interviewed on 7/10/09 and stated that she did not recall the hairdresser requesting to wash Resident #1's hair.</p> <p>Resident #1 was interviewed at her new home on 7/10/09 and reported she was not sure why she could not get her hair washed at the beauty shop. She said she was told she just had to leave the</p> | Y 590  |  |                          |  |

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| Y 590  | <p>Continued From page 3</p> <p>shop. The resident reported she did not get enough food at the facility and she had to pay extra money to get food and drink. The resident related that she like the food in her new home, got plenty to eat and did not have to pay extra money.</p> <p>Resident #2 was admitted to the facility on 7/1/09 with diagnoses including end stage chronic obstructive pulmonary disease, congestive heart failure, coronary artery disease, diabetes, gastroesophageal reflux disease, depression and anxiety. The resident was bedbound and receiving hospice services. On 6/22/09, the hospice note indicated the resident had Stage II decubitus (pressure ulcer) on both buttocks measuring 0.5 centimeters. The hospice Registered Nurse (RN) was at the facility during the survey and indicated the decubitus are healing and looked like an abrasion. Interview with Resident #2 revealed she remains in bed all the time and was unable to change her position without help from the caregivers. The hospice RN explained she had to show the owner (whom is the only caregiver the majority of the time) how to change the position of the resident help prevent more pressure sores. The resident reported the owner/caregiver checks on her at night at 10:00 PM and then in the morning at 7:00 AM. The resident has a small bell on her bedside table provided to her by her son so she could ring for help if she needed it. The resident explained she has rung the bell during the night and the owner does not respond so she lay in the same position all night.</p> <p>Resident #2 was receiving 3 liters of oxygen via nasal cannula. During the visit it was noted the resident had a frequent moist cough. The hospice RN indicated there were breathing treatments ordered as necessary for congestion.</p> | Y 590  |  |                          |  |

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| Y 590  | <p>Continued From page 4</p> <p>The RN reported the owner did not know how to provide the breathing treatments and had lost a part of the machine (nebulizer) down the sink, so a new nebulizer had to be ordered.</p> <p>Resident #2's daughter and son were present during the survey. The daughter indicated on one occasion she visited her mother at 4:00 PM and her mother complained of not having lunch. The owner was not in the facility and had left her husband to watch the residents. He stated he was not there during lunch and called the owner to find out if the resident received lunch. The daughter explained the owner argued with her on the phone and insisted the resident had received lunch. The daughter revealed on another day, 7/9/09, her mother received only a burrito from Taco Bell and a little bit of vanilla ice cream for lunch.</p> <p>Resident #2's son reported that during one of his visit with his mother, he found her Foley catheter bag lying in a basin and urine was in the basin. The hospice RN reported she had told the owner multiple times to empty the bag frequently but the owner still did not empty the Foley catheter bag and did not know how to correctly clamp off the Foley catheter bag. The RN reported had observed the catheter bag to be full of urine on her visits. She and the resident 's daughter reported the carpet in the resident 's bedroom was often soaked with urine.</p> <p>Resident #2's son told the surveyor his mother called him one evening around 6:00 PM because she had a bowel movement and the owner told her she would change her after she ate her dinner.</p> <p>Both Resident #2's son and daughter were concerned regarding the care their mother was receiving at the facility. They have been in the process of looking for another placement for their mother. Both revealed they felt they need to be</p> | Y 590  |  |                          |  |

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| Y 590  | Continued From page 5<br><br>at the facility to assure their mother was taken care of properly.<br>The hospice RN stated the resident was to be moved on 7/10/09 to another facility. The hospice RN did not feel the resident was properly cared for in this facility. She reported the resident was not being turned, was not receiving her breathing treatments and the owner did not appear to know how to take care of the Foley catheter.<br>Resident #3 had diagnoses including dementia, hypertension, hypothyroidism and arthritis. There was no documented evidence of an admission date or initial physical. There were no signed consents found in the resident's medical file. There were no physician orders for medications. Resident #3's Medication Administration Record for July of 2009, indicated he was to receive Zolpidem 10 mg as needed. The medication bottle indicated the resident was to receive the medication at bedtime. Resident #3 appeared unkempt and his hair appeared very oily. The resident indicated he was not getting showers, he just gets a sponge bath. He was unable to remember what he ate for lunch.<br>Severity: 3 Scope: 3 | Y 590  |  |                          |  |
| Y 620<br>SS=G  | 449.2702(4)(a) Admission Policy<br><br>NAC 449.2702<br>4. Except as otherwise provided in NAC 449.275 and 449.2754, a residential facility shall not admit or allow to remain in the facility any person who:<br>(a) Is bedfast.  | Y 620  |  |                          |  |

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| Y 620  | <p>Continued From page 6</p> <p>This Regulation is not met as evidenced by:<br/>Based on observation, interview and record review on 7/10/09, the facility failed to ensure a bedfast person would not be admitted to the facility (Resident #2).<br/>Findings include:<br/>Resident #2 was admitted to the facility on 7/1/09 with diagnoses including end stage chronic obstructive pulmonary disease, congestive heart failure, coronary artery disease, diabetes, gastroesophageal reflux disease, depression and anxiety. The resident was bedbound and receiving hospice services. On 6/22/09, the hospice note indicated the resident had Stage II decubitus on both buttocks measuring 0.5 centimeters. The hospice RN was at the facility during the survey and indicated the decubitus are healing and appeared like an abrasion. Interview with Resident #2 revealed she remains in bed all the time and was unable to change her position without assistance. The resident revealed the owner (whom is the only caregiver the majority of the time) checks on her at 10 PM and then again at 7 AM. The resident had a small bell on her bedside table provided to her by her son. The resident explained she had rung the bell during the night and the owner had not responded. The hospice RN explained she had to show the owner how to change the position of the resident in bed. Resident #2's son revealed during a visit with his mother, he found her Foley catheter bag lying in a basin and urine was in the basin. The RN revealed the owner did not know how to empty the Foley catheter bag and did not know how to correctly clamp off the Foley catheter bag. The RN also indicated she had told the owner multiple times to empty the catheter bag frequently. The RN had observed on her visits the catheter bag</p> | Y 620  |  |                          |  |

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| Y 620  | Continued From page 7<br><br>would be very full of urine. The daughter revealed the carpet was soaked with urine during one of her visits to the facility.<br>Both Resident #2's son and daughter had concerns regarding the care their mother had received at the facility. They have been in the process of looking for another placement for their mother. Both revealed they feel they need to be at the facility to assure their mother is taken care of properly.<br>The hospice RN stated the resident was to be moved on 7/10/09 to another facility. The hospice RN did not feel the resident was properly cared for in this facility. The resident was not being turned, she was not receiving her breathing treatments and the owner did not appear to know how to take care of the Foley catheter.<br>Severity: 3      Scope: 1 | Y 620  |  |  |
| Y 830<br>SS=C  | WAIVERS<br><br>1. The administrator of a residential facility may submit to the Division a written request for permission to admit or retain a resident who is prohibited from being admitted to a residential facility or remaining as a resident of the facility pursuant to NAC 449.271 to 449.2734 , inclusive.   | Y 830  |  |  |

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| Y 830  | Continued From page 8<br><br>This Regulation is not met as evidenced by:<br>Based on interview and record review, the facility<br>failed to request a bedfast waiver for 1 of 1<br>bedfast resident (Resident #2).<br><br>Severity: 1                  Scope: 3  | Y 830  |  |  |
| Y 878<br>SS=H  | 449.2742(6)(a)(1) Medication / Change order<br><br>NAC 449.2742<br>6. Except as otherwise provided in this<br>subsection, a medication prescribed by a<br>physician must be administered as prescribed by<br>the physician. If a physician orders a change in<br>the amount or times medication is to be<br>administered to a resident:<br>(a) The caregiver responsible for assisting in the<br>administration of the medication shall:<br>(1) Comply with the order.<br><br>This Regulation is not met as evidenced by:<br>Based on record review and interview on 7/10/09,<br>the facility failed to ensure that 2 of 3 residents<br>received medications as prescribed (Resident #1<br>and #3).<br><br>Findings include:<br><br>On 6/11/09, during a complaint survey, it was<br>noted Resident #1 had been ordered Lasix 40<br>milligrams (mg), give one tablet daily, by her<br>physician on 3/13/09. The Medication<br>Administration Record (MAR) and medication<br>bottle indicated the resident had received Lasix | Y 878  |  |  |

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| Y 878  | <p>Continued From page 9</p> <p>20 mg every day. The owner had been advised during the 6/11/09 visit to clarify the Lasix order with the resident's physician. There was no documented evidence this had occurred. Observation of the MAR and medication in another group home revealed the resident continued to receive Lasix 20 mg every day. The caregiver at the other group home revealed she just gave the medication that came with the resident on admission to the facility. There was no documentation of a transfer/discharge record in the resident's medical record.</p> <p>Resident #3 had diagnoses including dementia, hypertension, hypothyroidism and arthritis. There was no documented evidence of an admission date or initial physical. There were no signed consents found in the resident's medical file. There were no physician orders for medications. The owner acknowledged she gave the medications which the resident had on admission to the facility. Resident #3's MAR indicated he was to receive Zolpidem 10 mg as needed. The medication bottle indicated the resident was to receive the medication at bedtime. This was a repeat deficiency from the 6/11/09 complaint survey and the 11/21/08 State Licensure survey.</p> <p>Severity: 3      Scope: 2</p> | Y 878  |  |                          |  |

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